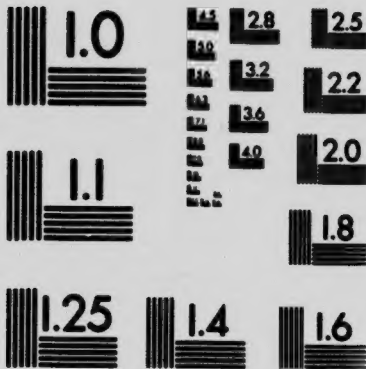




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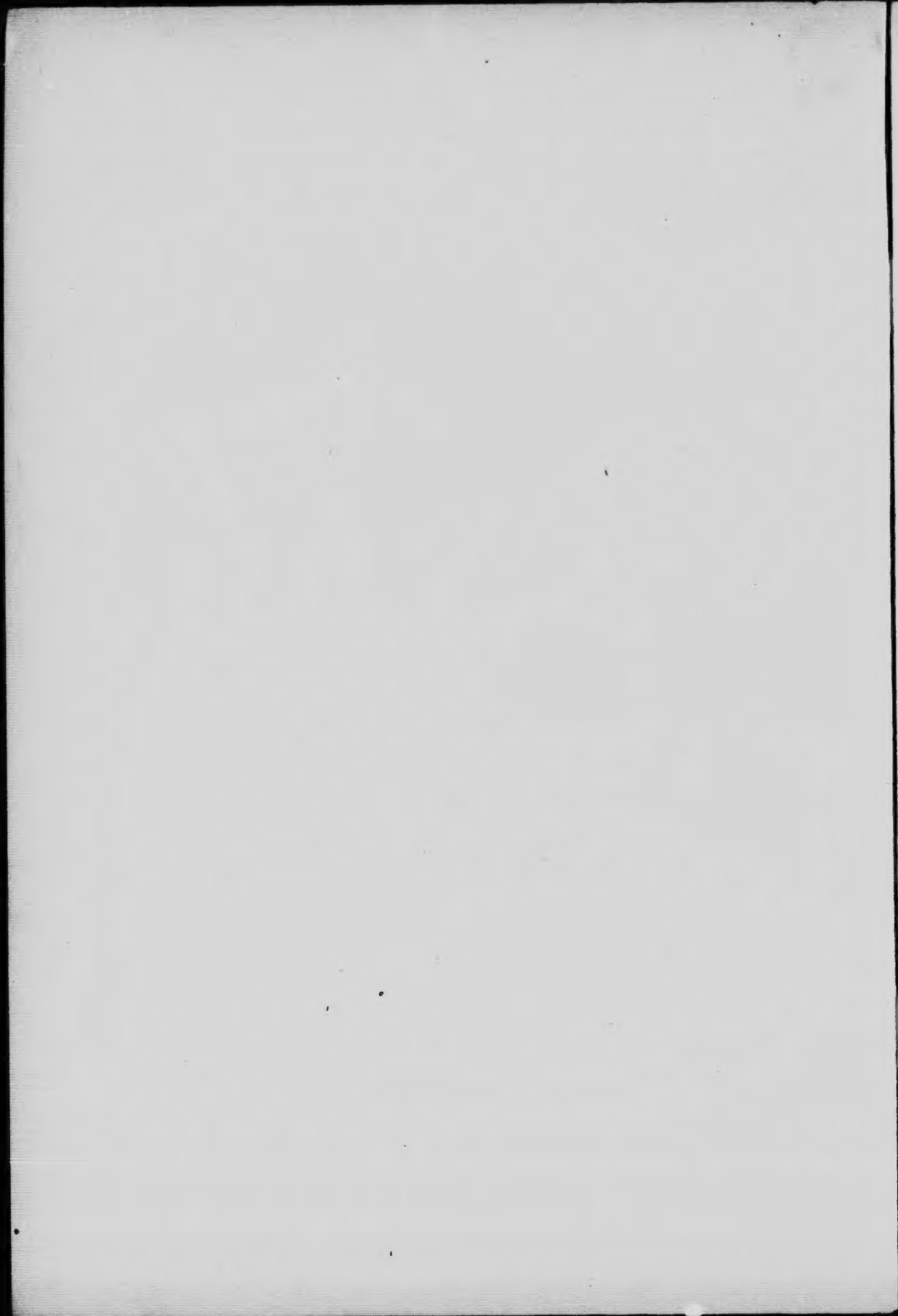
1908



THE GENERAL HOSPITAL

VERSUS

UNIVERSITY OF TORONTO



THE GENERAL HOSPITAL

AND

THE UNIVERSITY OF TORONTO

Following articles on the subject of dispute between the Toronto General Hospital Board and the University of Toronto have appeared in the Toronto Evening Telegram:—

From The Evening Telegram, May 2, 1908.

HOSPITAL V. UNIVERSITY

THE HOSPITAL RE-ORGANIZATION

Hospital Board Refuses to Recognize University in the Appointments — University Men Protest.

There seems to be trouble ahead for the Board of Trustees of the Toronto General Hospital.

The staff of the Hospital was lately re-organized. There was much of delay, weeks, months, yes, a year, elapsed before the plan of re-organization was finally adopted and ready for installation.

The system of different services, each with a responsible head, was adopted, and it was ordered that on the 1st of May, 1908, the re-organization programme should come into force.

STRIFE OVER STAFF POSITIONS

During the long period that intervened between the lifting of the first plan of re-organization and its final adoption, there was a bitter contest as to the filling of positions on the staff. For a time it was open warfare, for there were practically two camps, or rather only one camp, for the cause that did the campaign talking represented the younger element who claim-

ed that the older heads were not up to date, were behind the age in medicine and surgery, and that new blood was required on the Hospital staff. The struggle for appointment was phenomenal. Those who were eager to get positions used every effort to accomplish their object. Every pull known in political contests was used. Politics played quite a part, and influence of this character was used to the limit, yes, and beyond the limit, in order to obtain position. Social influence was also exerted. Those who gave large subscriptions were also called in to help friends to appointments, and business influences of every kind were sandwiched in to make a sure thing for the applicants who might be benefitted by such influences. The whole matter looks rather serious for the future of the Hospital.

TROUBLE IN STORE.

It will have to be straightened out at once. The University and the Government will have to be settled with, and the understanding on which the University came in, as a most important factor in the new scheme, by which the Hospital was to be made one of the best equipped and modern on the continent, will have to be carried out.

This is the view expressed by friends of the University who do not desire to be drawn into the discussion at this stage of the game, but who later on are prepared to put up a fight that

will be a surprise to some of the gentlemen on the Board of the Toronto General Hospital.

The story of the connection of the University with the re-organization of the Hospital and the payment on certain conditions of \$300,000 in aid of the new Hospital, is known to the public, and was published at the time the agreement was entered into.

TURN DOWN VARSITY MEN.

At that time everyone, especially the University authorities, thought that the conditions on which the University entered into the agreement were so plain that there could not be any misunderstanding. The primary condition, the practical condition, and the only condition on which the University could lend a hand, was that the institution should be recognized to the fullest extent in the appointments on the new services that were to be inaugurated when the re-organization took place.

So far this condition has not been fulfilled. On the contrary, at least three of the staff of the Hospital on the surgical side have been told that even if they are on the University staff their services are not recognized by the Trustees of the General Hospital. It is understood that the three surgeons referred to are Mr. Cameron, Dr. Teskey and Dr. Grasett.

SIDETRACK FOR UNIVERSITY.

The story of the part that the University of Toronto was to take in the reorganization of the General Hospital can be stated in a few paragraphs.

The University went in to the arrangement with a whole-heartedness that evoked public appreciation. The people felt that when the University took hold the Hospital reorganization and the construction of the new building would be assured. The University promoted the Hospital bill, when it was introduced into the Legislature, on the understanding that their clinical chairs would be represented on the Hospital staff; that all the public ward patients, including the out-patients, would be put under the University staff so appointed. As a matter of fact the University gets nothing, for its men have no recognition.

APPOINTED THREE SERVICES.

The trust appointed three services, and declined to appoint a University service or to make any one of the three services a University service.

But they said: "We will give Mr. Cameron, the professor of surgery in the University, five beds from each of the three services, or fifteen beds in all, or every sixth case admitted into the public ward, but no connection with the out-patient department." The appointment of Mr. Cameron was practically a personal one, for when he requested that Dr. Grasett should take his service the trustees refused, claiming that the appointment was a personal one and not a University appointment, and declining to recognize the University of Toronto as such.

IS TRUST SUPREME?

The Hospital Trust claim that they are responsible for the persons they appoint, and on that ground declare that they will not accept the University nominations.

The University was to give \$300,000 on the understanding, of course, that they were to be recognized. But so far they got no return or recognition whatever under this arrangement as it is understood by the Trust.

STAGES TO GO THROUGH.

The reorganization scheme of the Hospital has yet some stages to go through, that have evidently not been thought of by the members of the Hospital Trust. They are evidently unaware that the reorganization has to receive the sanction of the Lieutenant-Governor in Council, in fact, that it has to receive the approval of the Ontario Government, and that until these approvals have been received, the entire arrangements regarding the reorganization scheme are a dead letter.

The Hospital Trustees, however, are carrying out their reorganization scheme, paying no attention to objections, and apparently forgetting the requirements that are necessary before the scheme can assume legal form.

The fact of the refusal to recognize the University in the request made regarding Dr. Grasett shows that the Trust do not intend to recognize the University in the working out of their plans generally.

NOTICE TO QUIT.

The three services of the University staff on the Hospital staff were represented by Mr. Cameron, Dr. Teskey and Dr. Grasett, prior to the reorganization, but these gentlemen are now deposed and have received notice that they are to quit.

There is no one now on the Hospital surgical staff with a higher rank than associate professor.

The medical side would be in the same position as the surgical side but for the fact that Dr. McPhedran accepted one of the services, and he happens to be on the University staff.

POLICY OF NON-RECOGNITION.

It is said that Mr. Flavelle thinks that if the University is recognized by the Hospital Trust, that a good many people who are not friendly to the University, and who have subscribed money for the erection of the new Hospital, may not respond with cheques for their subscriptions. It is said that he thinks that there are some of the subscribers who gave their names as contributors on the strength of non-recognition of the University, and that it would be breaking faith with those people to acknowledge the University's rights.

VERY DECIDED OPINION.

It is understood that Prof. Loudon has a very decided opinion in connection with this non-recognition of the University and has communicated with the Government and insisted that the terms of the agreement should be carried out to the letter and that the University must be recognized and must be represented, as was distinctly understood when the University was asked to take part in the reorganization of the Hospital services and aid in the erection of a new building.

ARRANGEMENT AS IT WAS.

Under the old arrangement, that is, prior to the reorganization, all the chairs with a clinical side were represented by a professor. Under the reorganization the chairs in medicine and ophthalmology are the only ones represented by a professor, and these not because they are professors, but because they were appointed and happened to be professors on the staff of the University. The medical men so appointed were Dr. McPhedran and Dr. Reeve.

The department of obstetrics, gynaecology (or diseases of women), otology (or diseases of the ear), laryngology (or diseases of the throat) on the Hospital staff happened to be filled by men who were also associate professors in the University, but their appointment is practically personal and not because they are representatives of the University.

PREMIER WHITNEY INFORMED.

It is understood that Mr. Whitney, the Premier, who is aware of the action of the Hospital Trust, has had his attention called in very emphatic form to the disregard of the conditions of the agreement by which the Hospital Trust were to recognize the University, and that he is not prepared to stand for the reading of the agreement as diagnosed by the Board. It is also stated that quite a number of those who gave their money to aid in the erection of the new building are not at all satisfied that any arrangement that the Hospital Trust may promulgate would be satisfactory to them if this ignoring of the University of Toronto in the reorganization is to be carried out.

PROBLEM TO BE SOLVED.

The feeling is in University circles, that that institution should not have given so large a sum as \$300,000 to aid in the erection of the new building for the General Hospital, if the University, in its departments of surgery and medicine, is to be deprived of the rights and privileges that it was guaranteed when the Ontario Government took hold and endorsed the scheme by the passage of an act of the Legislature.

Certain it is that the Hospital Trust are face to face with a difficulty that will have to be removed if the scheme of the reorganization of the services of the Hospital is to be successfully carried on and a new and modern hospital building erected.

DOCTORS DISSATISFIED.

Enquiry at the University goes to show that several members of the staff of the faculty of medicine are not at all satisfied with the arrangements which the Board of Trustees of the General Hospital are said to be making. University authorities, however, are disinclined to discuss the matter.

"Yes, it was my impression that the University was to be recognized in the reorganization of the Hospital," said Dr. Loudon, former president of the University. "That, I believe, was the understanding of the Board of Trustees of the University, but I do not know what arrangements have been made by the Board of Governors. The former Board, of course, is no longer in existence."

"Is it not a fact that whatever

arrangements the Hospital trustees make will need to receive the sanction of the Ontario Government?" asked The Telegram.

"I believe that that is the case," said Dr. Loudon.

"Several appointments of University men have been made to the Hospital staff, but I believe that each appointment was personal, and not because the man belonged to the University."

President Falconer declined to say anything whatever concerning the arrangements made by the Hospital or the relations in this matter between the Hospital and the University.

From The Evening Telegram, May 4, 1908.

WHAT THEY SAY ABOUT IT

'VARSITY-HOSPITAL GRIEVANCE.

University Representative Will Investigate—Dr. Orr Denies any Agreement Was Broken—Both Sides Heard.

That dissatisfaction does exist over the fact that some of the appointments made to the General Hospital staff seem to slight Toronto University men, was verified in statements made to The Telegram to-day.

A number of gentlemen were interviewed. Some are governors of Toronto University, and some are on the Hospital Trust.

It will be observed that those who have to do with the making of these appointments under the reorganization scheme profess to know very little about it; in fact, a surprising number admit that they have been "asleep at the switch," so to speak, for at least a couple of weeks.

But that any appointments attempted to be engineered improperly will be nipped in the bud, seems certain. J. A. Macdonald, one of the Board of Governors of Toronto University, promised he would at once look into the matter.

WANTS SEPARATE HOSPITAL.

"The trustees of the Hospital are certainly not taking the University into consideration in regard to appointments," said Dr. G. H. Burnham, professor of ophthalmology and otology at University.

"The trustees seem to be acting as if they had a perfectly free hand,

whereas they should consider the University in all appointments to the hospital staff.

"The trustees are likely to find that they must be just or that a great deal of trouble must ensue.

"The question of a hospital may have to be put on a different basis if the trustees do not act properly. I consider the best and most sensible thing to be to have a hospital wholly under University control, and the University would be fully responsible.

"Divided responsibility is not in the best interests of the hospital, and the trustees are not acting in a proper or straightforward way.

"The University could be held responsible for its own hospitals, and University people would work together well. The University could have a hospital, and the city might have a different hospital of its own."

Dr. H. B. Anderson, associate professor in clinical medicine at the University, stated that he considered it would not be well for him to speak of the question to-day, but he said that he might have something to say concerning it in a day or two.

SOME DISSATISFACTION.

"Yes, there is some dissatisfaction I have heard," said Dr. George A. Bingham, one of the new heads in the surgery department, who has been connected with the department for many years. "I suppose there always will be dissatisfaction with any appointment that is made. What particular dissatisfaction do you refer to?"

"It is said that the University men are dissatisfied because none of the University men have been appointed on the staff."

"But they have. Doctors Bruce and Primrose in the surgical department, and Dr. McPhedran, in the medical department, are University men."

PERSONAL APPOINTMENTS.

"Were they appointed because of their University connection?"

"No, I think not. I think they were appointed on account of their work entirely, and I think that is the course the Hospital Board has followed."

"It is said that the principal dissatisfaction is over one particular appointment."

"I understand that there are some objections to the passing over of Mr. Cameron in favor of a younger man."

"WRONG," SAYS McPHEDRAN.

Dr McPhedran, one of the three heads in the medical department, and also one of the University professors, is strongly of the opinion that the University has been slighted.

"I think perhaps I should say nothing," he said, "but it was clearly understood at the time the University grant was made that the University would have the privilege of selecting certain members of the Hospital staff."

"Well, you yourself are a University man, Dr. McPhedran."

UNIVERSITY SLIGHTED.

"Yes, but I was not appointed because of my connection with the University, although it may have had some influence. But it is not right. The University should have had the appointing of certain members of the staff. We pressed strongly for that at the time of the organization for the new Hospital, and it was conceded by the trustees."

"The Hospital board has made all the appointments itself, and the University has no status in the matter at all. It is not right."

Dr. Herbert A. Bruce, one of the new members of the surgical staff, is out of town.

DR. ORR SPEAKS.

"The Board spent a year in reorganizing the staff," said Dr J. O. Orr, a member of the Hospital Board, "and found some old abuses connected with the system. In doing so somebody had to be hurt. I can say this, that they have given the majority of the members of the medical profession entire satisfaction. The younger men are convinced that the Board is in earnest in not allowing some men to hold positions for life."

NO AGREEMENT BROKEN.

"Have you broken your agreement with the University?"

"We have broken no agreements," replied Dr. Orr emphatically. "Principal Falconr was on the committee and was perfectly satisfied with the arrangements, that is for the present. These are subject to revision in two years. When the board came to the city for \$200,000 there was an understanding that outside physicians should be considered. We desired to appoint the very best men for the purpose of healing the sick. The University was satisfied because they felt

that they had the best men and they would be appointed. With us the healing of the sick is paramount, and with the University the teaching. Of course, if we could find a man with both qualifications we would gladly appoint him."

Mr. Cawthra Mulock, a member of the Hospital Trust, said to-day that he thought the University of Toronto was being treated in an exceptionally liberal spirit in the appointments that had been made. Mr. Mulock has been ill for two weeks, and said he had heard of no friction developing.

TO SECURE THE BEST.

"The Ontario Government and the University have practical control of the appointments, and they should be able to see to it that the University is fairly well represented. If they do not think it is. The aim of the Hospital Trustees is to appoint the best medical and surgical staffs that they can possibly select, to give the best results possible for the people of this city. That is the aim of the trustees, and it is being carried out."

NOT SOLELY 'VARSITY HOSPITAL.

"It is not my opinion, and I think the people of the city will agree with me, that this new hospital should be solely a University Hospital. We must have the free selection of the men to serve on the staff, and if the trustees are not doing what is best for everyone, why, they should get other trustees to serve."

DEPRIVED OF BEQUESTS.

Then Mr. Cawthra Mulock brought up another, if somewhat allied matter. He said:—

"When the Mowat government introduced the measure providing for the creation of succession duties on large estates, I understand the specific disposition of the funds so levied was to be to the hospitals and charities of the Province. These duties have not gone to hospitals and charities, but have been devoted largely to the University and to other educational purposes. The result is this, that wealthy men have left out of their wills bequests to the general and other hospitals, having in mind that the dues taken from their whole estate would be devoted by the government to hospitals and charities. The consequence is that the General Hospital has not got a good deal of money it would have received through legacies. In-

stead a good deal of this money has gone to the University, and it is a portion of this money, I presume, that is included in the grant from the University of \$300,000."

WOULDN'T LIKE TO SEE.

Dr. K. C. McIlwraith, head of the obstetrical department of the General Hospital, when questioned to-day, said: "This whole matter is one that has been given very little consideration by me, and I would not like to venture a criticism."

"How do you feel on the question of sidetracking the University of Toronto?"

"None of us would like to see that."

"What about Mr. Cameron?"

"Mr. Cameron is still on the staff of the new hospital."

"Well," said Dr. McIlwraith, "I suppose the relationship that the Hospital bears to the University will not be known until the reorganization of the University staff. That has been rumored, but anyway it is a matter upon which I am not prepared to speak."

DECLINES TO SPEAK.

Dr. J. F. W. Ross, head of the department of gynaecology or diseases of women, said: "I will have nothing to say for publication. It is far better for us to wash our dirty linen among ourselves than by means of publication. You must excuse me on this occasion."

NO DISPUTE, HE SAYS.

Mr. J. W. Flavell, when asked as to the matter, said there was no dispute between the University and the Hospital trustees. "It is very unfortunate that such an article should be printed, as it is untrue," he said. "There can be no legal hitch over the payment by the University of the \$200,000, because the money is already paid over."

Mr. E. B. Osler, a University governor, said he had not been at the last two meetings of the board, and was not therefore in a position to comment on The Telegram's article.

MUST BE RECOGNIZED.

Rev. J. A. Macdonald, of the Board of Governors, while stating that recently he had not been able to keep in close touch with hospital matters, and so had not heard that a good deal of friction was being engendered, stated emphatically that the University must be recognized.

It seemed almost incredible to Mr. Macdonald that the Hospital Trust should make any appointments alien to the idea under which the University became an active partner in the hospital scheme.

"I will look into this matter," said Mr. Macdonald. "The interests of the students in the medical profession in the Province, and those of the University in connection with the hospital, are indissoluble. Nothing can be allowed to interfere with that."

WILL MAKE INQUIRY.

"The University will expect adequate representation in the medical and surgical services?"

"It will have to get adequate representation," he declared with emphasis. "If the opportunities for clinical work are not adequate, the interest of the University and the whole people of the Province, at once suffers."

Mr. Macdonald said he had not spoken to any of the physicians affected, but he would make an inquiry into the standing of the question involved.

HEARD OF NO OBJECTION.

Dr. G. R. McDonagh, of the Throat, Nose and Ear Department, when seen to-day said:—"I have not heard any objection. I was under the impression that everything was running smoothly. The University of Toronto has never received any special recognition, and I can understand that some who expected appointments and did not get them may feel sore and disappointed. On the other hand, some of those who were on before the reorganization and who were dropped have told me that they are much better satisfied. I do not want to say much about the matter because I have not read about any objections, and I know of none. That is all I care to say."

From The Evening Telegram, May 6, 1908.

HOSPITAL AND UNIVERSITY

TROUBLE OVER APPOINTMENTS.

Chancellor Meredith Says There May Be Need to Consider If Changes in Act Are Necessary.

"If under the law the University is not entitled to more than the trustees of the General Hospital are giving us, we may have to consider whether changes in the hospital act are neces-

sary," said Sir William Meredith, Chancellor of the University of Toronto to-day when asked by The Telegram concerning the difficulty between the hospital and the University over appointments to the hospital staff.

"There are two sides to the question, and there is a wide difference of opinion. I hope that any differences of opinion may be adjusted by mutual concessions or arrangement, but if not, the question must be decided by the Ontario Government.

"Our position is that for the purposes of clinical instruction, the University should be recognized in the care of patients.

VARSITY NOT SATISFIED.

"In order to give proper instruction, it is essential that whoever is giving the instruction must have charge of the patient.

"There are University men on the staff of the hospital, but it might not be so to-morrow. We must know where we stand, but my own view is that the hospital act secures to us all that is essential.

"The hospital trustees take the position that they are responsible to the public, and so say that they have the absolute right to decide concerning appointments.

"The University is not satisfied. However, I don't want to emphasize differences, and I think that common sense ought to lead to the matter being settled amicably."

From The Evening Telegram, May 11, 1908.

UNIVERSITY HAS RIGHTS IN THE NEW GENERAL HOSPITAL.

A special place was guaranteed to the University of Toronto in the future activities of the New General Hospital. The basis of that guarantee was a direct contribution of \$300,000 from the funds of the University towards the resources of the hospital.

The purpose of a grant of \$300,000 of University money towards the creation of a great new hospital in Toronto was not, and could not have been, philanthropic.

The Ontario Government would have never authorized the University governors to diminish the funds in their keeping by a charitable grant of \$300,000, or any sum whatever.

The grant of University money to the hospital funds was meant to serve an educational purpose.

The University justified the grant

by the contention that special and adequate clinical facilities were the consideration which the new hospital would give to the University in return for the \$300,000 it had received from the University.

The bargain was specific in its description of the amount of \$300,000 which the University was to pay. The benefits the University was to receive in return for that payment were not set forth in all the amplitude and exactitude of a first mortgage.

The understanding was that the University chairs would be represented on the hospital staff, and that the public ward patients and the outdoor department should be reserved for the University staff.

The hospital took the money of the University, but now declines to fulfil the conditions—"it has not delivered the goods."

The governors of the University of Toronto and the trustees of the General Hospital must work together. Mr. J. W. Flavelle and his associates are bearing a heavy burden of work for the general good of humanity and the particular good of the city. They can afford to keep the understanding between the University and the hospital, not in the mere letter, but in the spirit. The understanding which the University accepted as a guarantee that would justify the expenditure of \$300,000 has not been kept even in spirit or letter.

The governors of the University will have to see that the rights of their institution are recognized and preserved.

The recognition and preservation of these rights can be easily harmonized with every element of strength and greatness in the new hospital system.

A misunderstanding that never should have arisen ought to be cleared up by a recognition of the truth that the University has rights which are in no way inconsistent with the best interests of the General Hospital.

From The Evening Telegram, May 13, 1908.

QUESTIONS THE TRUSTEES OF THE TORONTO GENERAL HOSPITAL MIGHT BE ASKED TO ANSWER.

Were the three seniors in surgery all displaced at once on the supposition that they were so useless that the University would not miss them? Or had their conduct, service and devo-

tion to duty been marked by failures such as to call for their removal? Or had the infirmities of age and disinclination or inability to work been so apparent to the Hospital Trustees that their service was no longer tolerable although the University still required it of them?

On what principle were their successors selected? Did the University nominate them? Or had their previous service in the hospital been so well and faithfully done as to call loudly for recognition and reward? Did the board carefully investigate their past records, and to whom did it apply for certificates and recommendation of their chose? Were any others of more faithful service passed over? And what influences were brought to bear on behalf of successful candidates, if candidates there were or applications asked for? Who were eligible, and what principle governed the selection?

Was the age of fifty-five years as the limit of surgical service selected upon general principles and confirmed by the practice of the great hospitals of the world, or is it unique and specially desired to meet local existing conditions?

Has there been any fair, serious and judicial and scientific investigation into the comparative merits and usefulness of the men who were displaced and those who replaced them? Or have the weapons of the assassin, dark hints, surreptitious suggestions, inuendos, calumny, slander, all equally void of proof and all born of jealousy, cabal and vindictiveness, been freely listened to and allowed to work their will?

The University will not be satisfied with anything short of complete recognition and equal influence, and the people of the province will not be satisfied unless the paramountcy of the University in all matters of medical education is guaranteed and secured beyond alienation.

From The Evening Telegram, May 14, 1906.

UNIVERSITY NOT SLIGHTED

SAYS W. T. WHITE.

In General Hospital Reorganization Scheme—As University Representative on Board He Tells of the Work.

The Telegram has received the following letter from Mr. W. T. White, a

representative of the University of Toronto, on the General Hospital Board:

Sir,—My attention has been called to certain articles in your paper alleging in substance that in the recent reorganization of the staff of the Toronto General Hospital, the just claims of the University had not been fairly considered, and to an editorial in your Monday issue charging that the Trustees of the Hospital Board were violating both the letter and the spirit of the agreement under which the Hospital received from the University the sum of \$300,000 towards its new site and building. All these charges are without foundation in fact, and should in justice to the Hospital Board be unequivocally withdrawn. As a representative of the University of Toronto on the Hospital Board, and as a member of the Reorganization Committee who attended all its meetings and prepared its several reports to the Board, I now propose to state the facts as to the reorganization, in order that the public, on whom the Hospital, like all other hospitals, must rely for support, may fairly judge as to whether the interests of the University have been overlooked. I affirm that throughout all their deliberations the Committee and the Board kept steadfastly before them not only the obligations of the Hospital arising out of the agreement and the statute, but the interests of the University from the standpoint of clinical teaching in a much wider sense than the agreement required, and the only criticism I have heard of the reorganization has been that among the medical profession as a whole in the city it is considered that the University of Toronto has been unduly favored.

PLAN OF REORGANIZATION.

In entering upon its duties the Reorganization Committee first considered with great care the principles which should govern the reorganization. In this connection, after having received the advice of Dr. William Osler and a distinguished member of the Medical Staff of McGill University, a special meeting was arranged with the Medical Faculty of the University and the question of the services fully discussed. The separate services afterwards decided upon were in accordance with the views expressed by the great majority of the members of the Medical Faculty present at this meeting, so that the Plan of Reorganization by the establishment of sep-

arate services, including indoor and outdoor patients, and the responsibility of heads of such services for their efficiency was really adopted on the advice of the Medical Faculty of the University of Toronto. The initial report of the Committee contained the following clause:—

"Your Committee in reaching its conclusions has borne in mind the object of creating an efficient organization which will give the best possible service to the patients for whose care the Hospital is responsible, and at the same time afford adequate facilities for promoting the interests of medical education and clinical and scientific research."

To the plan of reorganization finally adopted I have yet to hear any objection worthy of consideration.

PERSONNEL OF STAFF.

After having decided upon the plan of reorganization the Board of the Hospital had to consider the all-important question of the heads of the several services. The following appointments were made:—

Medicine.

Heads of Services.

Dr. A. McPhedran, Senior Professor of Medicine, University of Toronto.

Dr. W. P. Caven, Associate Professor of Medicine, University of Toronto.

Dr. G. Chambers, Associate in Medicine, University of Toronto.

Surgery.

Heads of Services.

Dr. G. Bingham, Associate Professor of Surgery, University of Toronto.

Dr. A. Primrose, Associate Professor of Surgery, University of Toronto.

Dr. H. A. Bruce, Associate Professor of Surgery, University of Toronto.

In order to make the closest and most friendly relationship between the University and the Hospital in the interests of medical education, the Committee made the further recommendation, which was adopted by the Board, that the Senior Professor of Medicine (Dr. McPhedran) and the Senior Professor in Surgery (Mr. Cameron) and their successors in the University of Toronto shall be ex-officio members of the active staff of the Hospital. In the event of these Professors being heads of services in the respective departments of medicine and surgery in the Hospital, they are subject to such regulations as apply to the heads of services, but at the termination of such

terms of service as such heads they continue as ex-officio members of the active staff, so that a connection is always maintained with the Hospital.

Gynaecology.

Head of Service.

Dr. J. F. W. Ross, Professor of Gynaecology, University of Toronto.

Obstetrics.

Head of Service.

Dr. Kenneth McIlwraith, Associate in Obstetrics, University of Toronto.

Ear, Nose and Throat.

Head of Service.

Dr. George McDonagh, Professor of Laryngology and Otology, University of Toronto.

Eye.

Head of Service.

Dr. R. A. Reeve, Professor of Ophthalmology and Otology, University of Toronto.

That is to say, all the heads of all the services without exception are members of the Medical Faculty of the University of Toronto.

SENIOR AND CLINICAL ASSISTANT

The heads having been appointed were consulted by the Committee with reference to their assistants. In every case the Senior Assistants were approved by their respective chiefs, and the appointment of clinical assistants was made upon the recommendation of the heads. The following Senior Assistants were appointed:—

Surgery.

Dr. C. Shuttleworth, Demonstrator of Surgery, University of Toronto.

Dr. F. N. G. Starr, Associate Professor of Surgery, University of Toronto.

Dr. C. L. Starr, Associate Professor of Surgery, University of Toronto.

Dr. J. O. Malloch, Demonstrator of Surgery, University of Toronto.

Medicine.

Dr. A. R. Gordon, Associate Professor of Medicine, University of Toronto.

Dr. J. T. Fotheringham, Associate Professor of Medicine, University of Toronto.

Dr. W. B. Thistle, Associate Professor of Medicine, University of Toronto.

Dr. B. Rudolf, Associate Professor of Medicine, University of Toronto.

Gynaecology.

Dr. F. Marlow, Demonstrator in Gynaecology, University of Toronto.

Obstetrics.

Dr. F. Fenton, Associate in Obstetrics, University of Toronto.

Eye Department.

Dr. C. Trow, Associate in Ophthalmology and Otolaryngology, University of Toronto.

Dr. J. M. Macallum, Associate in Ophthalmology and Otolaryngology, University of Toronto.

Dr. D. MacLennan.

Ear, Nose and Throat.

Dr. D. Gib Wishart, Associate Professor of Laryngology and Rhinology, University of Toronto.

Dr. G. Boyd, Associate of Laryngology and Rhinology, University of Toronto.

Dr. P. Goldsmith.

In observance of the Burnside Trust Agreement, Drs. Temple and Grasett, Professors in Gynaecology and Surgery, University of Toronto, were appointed life members of the active staff.

Will any sane man looking over this list reach the conclusion that the claims of the University have been disregarded? The net result is that all the heads and all the senior assistants, except two, are members of the Medical Faculty of the University.

With regard to the clinical assistants in the several services, all without exception were chosen by the heads responsible for the efficiency of the several services.

When it is considered that there are hundreds of practising physicians in Toronto of excellent standing in their profession, it is marvellous considering the composite character of the Hospital Board that the reorganization was able to be effected with such great regard to the interests of the University. Only a very laudable desire on the part of the profession as a whole and of the Hospital Board that clinical teaching should be assisted in every way made such a reorganization possible at all!

UNIVERSITY'S INTERESTS SAFE.

Recapitulating then, I say that the plan of reorganization as to services was approved by the Medical Faculty, that the heads of such services are Professors or Associates in the University of Toronto, that these heads approved of their assistants and chose their clinical assistants, so that from

first to last the University has been consulted and its interests safeguarded in the entire reorganization.

NOT A UNIVERSITY HOSPITAL.

It must be borne in mind that the Toronto General Hospital is not exclusively a University Hospital. The University is but one of several parties in its welfare. It is in the interests of both the Hospital and the University to work in harmony, but it must be kept in view that considerable support which the Hospital is now receiving might not have been available if the Hospital were exclusively a University Hospital. Many subscribers would have said, "It is a University Hospital—a Government institution—let the Government provide." The funds subscribed to the new Hospital are as follows:—

University of Toronto	\$300,000
City of Toronto	 \$200,000
Subscribers	 \$700,000

In addition to this the old Hospital Board brought in assets of the value of about \$1,000,000, in addition to the Hospital premises on Gerrard street east. It will thus be seen that while the University's contribution is a large sum, it is relatively not such as of itself to give the University exclusive control of the Hospital. It may be in the interests of the University to have a hospital exclusively to itself, but its contribution would have to be very much larger than at present to bring about this result. It must also be borne in mind that the City of Toronto, in addition to its special grant contributes substantially to the maintenance of the Hospital and that the whole citizen body is thus interested in the service given to patients. The Honorary Governors of the Hospital also contribute a substantial sum yearly to its revenues for the purpose of maintenance.

THE AGREEMENT.

We now come to the agreement under which the Hospital received \$300,000 from the University. This is a written document and speaks for itself. It shows the understanding between the parties and it is absolutely not the fact that the Hospital agreed before the agreement was executed that the Staff of the Medical Faculty or any of them should be appointed ex-officio on the Medical Staff. This was urged by representatives of the University at the joint committee meeting at the Legislative Buildings,

and the members of the Special Committee of the Hospital Board said it was impossible to make any such arrangement because of the interests concerned—the city and the subscribers. What then is the consideration of the University for the \$300,000? The Hospital covenants that it will proceed with the reorganization of the staff and that it will acquire the block of land at the corner of College street and University avenue and will erect a modern hospital to cost not less than \$900,000. It was also agreed that the regulations and restrictions to be made under the provisions of Section 20 of the Toronto General Hospital Act, 1906, shall be such as shall be agreed upon between the University and the Hospital or in the event of their being unable to agree as shall be determined by the Lieutenant-Governor in Council. The section referred to is as follows:—

"MEDICAL STUDENTS."

"The Trustees shall allow any Medical Student of the University of Toronto to visit the wards of the Hospital for the purpose of receiving instruction from the Members of the Faculty of Medicine upon the payment of such fees and under such regulations and restrictions as the Trustees may by any resolution or by-law from time to time appoint."

That is to say, the fees to be paid by medical students and the regulations and restrictions under which they are admitted to the Hospital must be such as the Hospital and the University may agree upon.

This is the agreement and it certainly does not make the members of the Medical Faculty ipso facto members of the Hospital Staff. In my opinion it would be against both the interests of the University and the Hospital if it did. How could the Hospital maintain discipline on its staff or administer the affairs of the Hospital if members of an outside body, appointed by a different authority, were to occupy positions on the Hospital staff without being responsible to the Hospital Board? How can the Board be made responsible for the care of the sick if it has not the power to appoint and remove those who attend them? A member of the staff who was incapable or neglectful of his duties could retain his position

in spite of the Board of the Hospital if he happened to be a member of the Medical Faculty of the University.

CONSTITUTION OF THE BOARD.

Under the Hospital Act the Board of the Hospital consists of twenty-five members, of whom five are appointed by the University and eight by the Government. The city has five representatives and the subscribers elect seven. I have yet to see anything but the fairest consideration of the interests of the University in all the acts of this Board, which is the more remarkable when it is considered how greatly the appointments in its control are valued by the medical profession at large.

I have shown that at every step in the reorganization the interests of the University have been most carefully considered. The Reorganization Committee waited for months until the new President of the University should be appointed and attend its meetings, as he afterwards did. The Chancellor and Vice-Chairman of the University Board were also invited to be present at the closing meetings of the committee in order that the position of the University should receive full and adequate consideration. No criticism, so far as I heard, came from the University so far as the plan of reorganization was concerned. Is it not a little late now, months after the new appointments were made, to urge that positions should be re-opened and men who have been assured of their appointments displaced?

SHOULD WORK IN HARMONY.

It is in the interests of both the University and the Hospital that the fairest understanding should exist between them. Any dispute injures the Hospital, and is detrimental to the interests of medical education. With the staff chosen as it is, almost entirely of University men, with a joint committee appointed to deal with the question of facilities for medical education, and with the whole Board of the Hospital desirous of living in harmony with the University, I do not see how any real difficulty can arise. One thing I am sure of, and that is, that disputes will never be avoided by virtue only of written agreements, defining the rights of the parties. The two boards must endeavor to work in harmony to promote the interests of

medical education, and to give the best possible care to the sick in the Hospital. I know this has been the feeling prevailing on the Hospital Board, and the appointment of the University men, as shown above, is the best evidence of the views of the board with reference to medical education.

THE NEW HOSPITAL

The financing of the new Hospital is a heavy undertaking on the part of the board. A great deal more money must be obtained from the public and the unfounded charges made by The Telegram will not make the task any more easy. The Telegram, I know, wishes to do no harm to the new project which is so much in the interests of the city and of the University, and I can only conclude that it has been made the victim of the most gross misrepresentation. I challenge any fair-minded man or journal to consider the facts above given, and say that in the re-organization of the staff of the Hospital the interests of the University and its just claims have been disregarded.

This is a letter from myself personally, and not on behalf of any board or committee. Your charge that the Hospital Board, after taking the money of the University, was violating the spirit and letter of the agreement under which it was received, seems like a reflection upon the honor of every member of the Hospital Board, and for my own part I entirely and utterly repudiate it. W. T. WHITE.

From The Evening Telegram, May 18, 1905.

THE GENERAL HOSPITAL EDICT.

"Now that we have appointed you upon our staff, you shall not serve upon any other hospital staff."

The above words in substance but not in form, expressed the terms of the decree which the trustees of the new General Hospital would apply to members of the University staff.

The enrolment of students at the University of Toronto is 700. The number of beds in the Toronto General Hospital is less than half 700. The educational needs of 700 students create a demand for clinical material which obviously cannot be supplied from the clinical resources of a hospital with 350 beds.

The University of Toronto has to think of its 700 students—and the number will increase—who must have clinical education from their own professors. If the clinical resources of the Toronto General Hospital are inadequate—and these resources are inadequate—the University must have other clinical associations and alliances than those to be found within the four walls of the General Hospital, new or old.

A constituency of 700 medical students may have needs which demand that members of the University teaching staff should hold dual or multiple hospital appointments. Appointments in one hospital might fail to give these teachers the clinical material which they need in their educational work.

If the needs of the University demand that members of its teaching staff should hold more than one hospital appointment, by what inherent right does the hospital board intervene? If there be no inherent right of interference, how has the right which is now assumed by the General Hospital Board been conferred or acquired?

Every hospital board must have the right to demand, and to exact, of the members of its staff such devotion of time and energy and interest as shall secure a wholly satisfactory and efficient service and preserve the well-being of its patients. The supremacy of the General Hospital Board is qualified by the terms of the understanding which brought the University of Toronto into the alliance. If the clinical resources of the General Hospital do not supply the clinical material needed for the thorough education of 700 medical students, the teachers of these students must find their clinical material in other hospitals or their students must suffer.

How can the members of the University Faculty of Medicine of Toronto supply full and adequate clinical instruction to 700 students if they are restricted to clinical work in one General Hospital with 350 beds? If the members of the University teaching staff can find all the clinical material they need in the General Hospital then the trustees could justify in practice, but not in principle, their edict restricting members of their staff to service upon one hospital staff.

The edict seems to be an injury to the cause of medical education and a breach of the understanding upon which the University entered into partnership with the General Hospital.

From The Evening Telegram, May 20, 1908.

HOSPITAL BOARD MUST KEEP FAITH WITH UNIVERSITY.

The subject of the attitude of the Toronto General Hospital Board to the University of Toronto in the re-organization of the Hospital staff and the erection of a new Hospital building is being freely discussed. Those immediately concerned on the University side are satisfied that the just claims of the University have been ignored and that notwithstanding the promises made at the time that the act concerning the Hospital and its re-organization went through the Legislature, a deliberate attempt, successful so far, has been made to sidetrack the University by the violation of the understanding come to when the act was before the Legislature.

The friends of the University claim that in letter and spirit the Hospital Board have distinctly done a grave injustice to the University, so much so that before any further steps are taken the objection that has been raised to the attitude of the Hospital will have to be absolutely removed and the University placed in the position it was understood it would occupy when the scheme of reorganization was proposed and passed by the Legislature. It is as clear as the noonday sun that there was an understanding that the University staff should be recognized as representatives of the University in the installation of the new services. That this recognition should be not merely by the appointment of University men on the Hospital staff but by the installation of a service that would be exclusively a University service, repre-

sented by professors of the University chairs.

It was on this understanding that the University paid \$300,000 towards the erection of a new Hospital building.

Mr. W. T. White, a member of the Hospital Board, has undertaken the task of defending the action of the Hospital Board, and he affirms that "the members of the Board kept steadfastly before them not only the obligations of the Hospital arising out of the agreement and the statute, but the interests of the University from the standpoint of clinical teaching "in a much wider sense than the agreement required," and that instead of the University being treated unfairly the medical profession think that that institution has been unduly favored.

A comparison of the General Hospital report for 1907 with the re-organized staff of 1st May, 1908, will show that the net result of the displacements and replacements effected thereunder so far as the University is concerned is the uncompensated loss to the University of at least twelve teachers, including two associate professors of clinical medicine, three professors of surgery and clinical surgery, two associate professors of clinical surgery, two associate professors of ophthalmology, one professor of gynaecology, and one professor of obstetrics, and others of lower grade.

Mr. White, in his letter, states that regarding the plan of re-organization by the establishment of separate services, "the responsibility of such services for their efficiency was really adopted on the advice of the medical faculty of the University of Toronto."

This statement of Mr. White's is somewhat disingenuous and hardly fair. At the meeting to which he refers the best testimony is to the ef-

fect that the abstract question of hospital work, single or with multiple services in each department, was discussed and the preponderance of opinion seemed to be in favor of multiple services. But no vote was taken, nor was any decision arrived at as to what was best in the concrete instance of the General Hospital viewed as a clinical and largely University Hospital, nor was there any consensus of opinion as to the number of services, nor, if the services were multiple, in favor of their limitation to three, and none of these a University service.

The value to a teacher of an ex-officio association without beds or patients in a hospital is difficult to discover. Mr. White's statement that "the only criticism I have heard of the reorganization has been that amongst the medical profession as a whole in the city, it is considered that the University of Toronto has been unduly favored." The source of this information Mr. White does not disclose. Nor is Mr. White more communicative as to the time and method when and whereby this opinion of the "profession as a whole" was secured; and "to the plan of reorganization finally adopted I have yet to hear any objection worthy of consideration" would seem to indicate either that Mr. White attended the meetings of the committee with closed ears, and was equally deaf in University circles, or else does not consider any objections with which he does not sympathize "worthy of consideration."

When Mr. White poses in print, as the chief and most diligent representative of the University and, as a University man, takes the position which he defends in his letter, the public will no longer wonder at his conclusion that "it is marvelous (sic) considering the composite (?) character of the Hospital Board, that the

re-organization was able to be effected with such great regard to the interests of the University." If all the University representatives felt and did as Mr. White says he feels and does, even the result attained, far short as it is of University hopes and expectations, would be "marvellous" as he says, and the University might well make the welkin ring with the despairing cry of "save me from my friends."

Mr. White's impetuous haste to rush to the aid of his Alma Mater immediately upon arriving from his rocking in the cradle of the deep, may perhaps account for the vertiginous disturbance of his vision and for the fact that he mixes up in an incongruous mass the various offices of professor and associate professor of medicine or surgery and of clinical medicine or clinical surgery and associates in these departments.

According to Mr. White the first action of the committee was to "consider with great care the principles which should govern the reorganization" and they very considerably published these considerations and gave them to the world which found no fault therewith. These considerations which were to govern in the matter of appointments were excellent on the whole and met with very general approval. But it was a mistake to publish them, for when the public came to compare the performance with the promise, the manifest dissipation of the principles to the four winds of heaven but served to emphasize the disappointment and the complete surrender to the old time discredited considerations of expediency.

Then regarding the appointment of the heads of the staff in medicine and surgery, Mr. White states that in order to make the closest and most friendly relationship between the University

and Hospital that Dr. McPhedran, the senior Professor of Medicine, and Mr. Cameron, the senior Professor of Surgery, were appointed their successors to be ex-officio members of the active staff. Mr. Cameron, Dr. Grasett and Dr. Teskey, the Professors of Surgery, were not consulted about any one appointment in the Surgical Division, nor asked their opinion.

Mr. White makes a nice distinction between "approval" and "choice." In one paragraph of his letter he says:—"In every case the Senior Assistants were approved by the respective chiefs, and the appointments of Clinical Assistants were made upon the recommendation of the heads"; and in another, "with regard to the Clinical Assistants in the several services, all without exception were chosen by the heads"; but he fails to see that in spite of the Senior Assistants being approved and the Clinical Assistants chosen, by the heads, the University does not assume responsibility for either the approval or the choice since "the heads" were not her nomination or her choice, and so far she has not expressed even approval of them in that capacity, but had assigned them to other duty.

Because "the Chancellor and the Vice-Chairman of the University Board were invited to be present at the closing meetings of the committee" affords no ground to affirm that they approved of the Board's conclusions unless they were actually present and expressed approval, but it will be remarked that Mr. White, with much astuteness, does not say that they were. For the same reason, that is that he did not hear it Mr. White ventures to assume that no criticism of the plan of reorganization came from the University.

It is not likely that the University would express formal criticism of a

scheme not brought before it, and probably nothing would even now be heard in the way of complaint or criticism had no. the Board set a limit to the time of patient endurance and expectation by bringing its unapproved plan into operation on the 1st of May. Beyond that date the University dare not endure without incurring the charge of acquiescence in the wrong about to be done her. This is the answer to Mr. White's interrogation: "Is it not a little late now, months after the new appointments were made, to urge that positions should be reopened and men who have been assured of their appointments displaced?" Surely "now" is the inevitable and accepted time by virtue of their own decree; and owing to their lack of official notice to the University, no earlier time was made acceptable or suitable for official protest. Equally surely the appointments were made, by their enactment, on the 1st of May, and, again, equally surely, the three Professors of Surgery and Clinical Surgery and the two Associate Professors of Clinical Surgery and others who had no notice of dissatisfaction or complaint, and had long continued assurance of their appointment by the University, with the rights and privileges and associations secured by custom 'n a long term of years, might justly complain of their peremptory dismissal if, as Mr. White thinks, it would be a gross and impossible injustice to displace the new appointees who had been encouraged by the Board to look forward to May Day as the hour of their triumphal entry into the seats of the Mighty!

From The Evening Telegram, May 21, 1906.

UNIVERSITY AND HOSPITAL SHOULD WORK TOGETHER.

With Mr. W. T. White's homilies on the necessity for harmony and collaboration between the University and the

Hospital, all will agree. But Mr. White and his colleagues must understand that the principle of "orthodoxy is my doxy and heterodoxy yours," can have no place in the negotiations, and that the people will see to it that the people's University is accorded all the rights and facilities in the Hospital as a University laboratory that can be properly secured with a due regard to the primary uses of a Hospital in the care and cure of the sick, injured and afflicted.

In connection with the case of Professors Temple and Grasett, Mr. White claims credit for the Board that having regard to the interests of the University these gentlemen were retained as "Life Members of the Active Staff," in accordance with an agreement with the old Burnside Trust. But the primary intention, and indeed, action of the Board was to displace these gentlemen entirely, and only when it was pointed out to them that this could not be done legally was it determined to make the life appointment, but without beds or patients. What credit, therefore, does the Board deserve for thus preserving the interests of the University; and what possible good can it do the University or the individual to maintain such an inane and empty association?

Mr. White says: "Will any sane man looking over this list (WHICH IF HE BE ANALYTICAL WILL SHOW HIM THAT 12 TO 15 TEACHERS, MOST OF HIGH GRADE, OF THE UNIVERSITY HAVE BEEN DROPPED FROM THE LIST ALTOGETHER AND THEIR PLACES NOT SUPPLIED) reach the conclusion that the claims of the University have been disregarded?" The "net result" is not what Mr. White would have us infer, but that the teaching power of the University is reduced by the services of a dozen or fifteen men. Is it likely therefore that the

next statement is literally correct that "the Clinical Assistants in the several services, all without exception, were chosen by the heads responsible for the efficiency of the several services." If so, is it not time that the University should enquire how it is that these gentlemen, who, the Board says, represent the University in the Hospital, should so far forget her vital interests as to nominate outsiders for appointments when 12 to 15 of her own teachers have been set aside and lost to use and name and fame? If this is the kind of safe-guarding the University's interests have had, and in the following paragraph Mr. White affirms it is, then indeed it is high time that some public guardian of the people's rights should speak out and call a halt until the whole matter has been investigated and set right.

Mr. White contends that the fact that the heads of services are University Associate Professors in Clinical Surgery, and that their Associates or assistants were nominated by the heads of services, therefore the whole service is a University appointment. But to show how empty this contention is, it is only necessary to recall the fact that these heads of services were not nominated by the University, and that when they selected their associates they did so without any reference to their own chief or any other University authority.

The plan of reorganization was never submitted to the Medical Faculty or to any authorized committee thereof, and has never been considered or pronounced upon by it, as Mr. White seems to hold erroneously. It is quite certain that the plan and the result have never been officially and entirely communicated even to the Board of Governors or any responsible body of the University. Mr. White points out the sources of pecuniary support, assigning \$500,000 to the Uni-

versity and the city combined and \$700,000 to "subscribers." The interests of the University and the city in the Hospital would be coincident—the latter desiring the best possible care and treatment of the patients, and the former adding to that desire the wish to use the occasion as a means of education and to diffuse the benefits thereof of the wide world over wherever her graduates may be. What interests the subscribers may have the outsider cannot tell, but it may be assumed that these interests are identical with the two others, in which case it is absurd to pretend that there is any difficulty or real objection to giving the University the freest possible hand, the utmost influence in the Hospital, it being the only participant in the common labour and object to whom it makes a particle of difference what is done over and above securing the best care and treatment of the patients.

It has been at times cast up to the University that it makes no pecuniary contribution to the Hospital funds, but everybody knows full well that the University's objects are educational and not eleemosynary, and that its funds, though gradually growing, are barely equal to the necessities of its existence and expansion. The members of its medical faculty are too poor to become subscribers to the Hospital. Not more than two or three of them could afford to make any substantial contribution beyond their time and labor (no mean consideration in itself) and should they do so would be open to the suspicion that they were paying for their posts because a Board, hampered by its poverty, is apt to attach an undue importance to pecuniary considerations.

The import of the written agreement between the University and the Hospital, which Mr. White recites and

then interprets, may be safely left to the lawyers to determine, and there seems to be little substantial ground for Mr. White's fear that if the University had any right to nominations the members of the staff would be beyond the control and jurisdiction of the Board. The fact is that any satisfactory conditions and restrictions might be imposed without objection, and if any member of the University staff were found "incapable or neglectful of his duties," or refractory or objectionable in any sense, the University would naturally be only too glad of the excuse of such complaint on the part of the Hospital Board to rid itself of such an undesirable and pernicious servant, for upon the University would redound the discredit of such an appointment. In this way, or by specific agreement with the University, any such unprofitable servant of the University might be instantly removed, the only difference being that the University would have the right and opportunity to name his successor. Surely in view of its greater interest and wider responsibility the University might be trusted to make its selections equally judiciously and carefully with the Board.

Then as regards Mr. White's statement that the Hospital not being an extension of the University Hospital.

The Toronto General Hospital is for teaching purposes a University Hospital.

If as in the present instance, as a special grace a professor and head of a department, were offered an ex-officio appointment on the staff by the right hand of goodfellowship and at the same time the left hand of detraction hedged it about with limitations and restrictions (such as an inferior number of beds conceded de facto but not de jure by the heads of services, coupled with ineligibility for the advisory board

composed of his juniors), which due consideration for the dignity of his office precluded him from accepting, then he must resign *volente volente*, or if not previously on the staff, decline the appointment; and in this case it at once becomes apparent that the Hospital Board would control the University appointment—a condition of affairs not to be patiently contemplated for one moment by any self-respecting University.

Mr. White says: "It is not a University Hospital," and the next moment claims credit for having made it as nearly as possible a University Hospital. And why should it not be a University Hospital? Would that fact not simply add to its value and efficiency? Is it not a teaching Hospital? And in order to be a teaching Hospital must not the care of patients be necessarily of the best and most up-to-date description? Is not a teaching Hospital constantly submitted to the most searching criticism of its methods and results? And is not the public value of a hospital inestimably enhanced when it becomes by teaching associations the centre for the dissemination in its pupils of the most recent acquisitions of medical science, and bears upon its shoulders the burden of the health, welfare and care, not only of its own inmates but of the inhabitants of all these regions served by the practitioners it trains and sends forth.

If the new Hospital be not a University Hospital why place it on the expensive site procured for it? If it be in fact a University Hospital with the added responsibility, importance and prestige thereby attached to it, why not frankly have it manned as best suits the University and the higher duty and greater opportunity of service thereby imposed upon it?

There is no natural antagonism or antipathy between the University and the city, and any attempts to create or maintain one if stirred up, are worthy only of the demagogue, the ward heeler and the politician. If there arise any accidental causes of friction between town and gown let all good citizens with one accord strive to minimize and remove them instead of harping upon them and magnifying them until they seem to assume portentous proportions.

There is no good reason why the city of Toronto should not be as proud of the University within her borders as the city of Edinburgh is of hers; and it would be good politics, in the literal sense, if all citizens of Toronto would vie with one another, each doing his utmost in zealous rivalry, to place the capstone of the educational system of the province high upon its acropolis to be seen and known of all men!

There are many other points that might be commented on. It will be noted that in the scheme of reorganization the chair of surgery is not represented on the Advisory Board. The chair of medicine soon will not be, and the Dean is not a member, except as a temporary head of service. Fewer University men are on now than before reorganization, and these of lower rank. Men transferred from St. Michael's staff are not a gain, as the University loses their services there—a fact which a member of the Board of Governors, who is also a member of the Hospital Board, would hardly be credited with overlooking.

To maintain interest, individuality, and solidarity, and the highest efficiency in a service, each service should be complete in itself from outpatient department up, and under the guidance and direction of a respon-

sible head, and of these the University service should be chief and largest, instead of smallest and most dependent, and without an out-patient department.

From The Evening Telegram, May 20, 1906.
GENERAL HOSPITAL EDICT
'NO BREACH OF UNDERSTANDING'

Says Correspondent — Exclusive Service Agreed to by Staff of Physicians of the Hospital.

Sir,—In Monday's paper you have an editorial containing the following paragraphs:

"Now that we have appointed you upon our staff you shall not serve upon any other hospital staff."

"If the needs of the University demand that members of its teaching staff should hold more than one Hospital appointment, by what inherent right does the Hospital intervene?"

"The edict seems to be an injury to the cause of medical education and a breach of the understanding upon which the University entered into partnership with the General Hospital."

I beg to inform The Telegram that the regulation referred to, so far from being a breach of any understanding, was adopted as the opinion and advice of the teaching staff of the University of Toronto on the Hospital staff prior to the recent reorganization. I have before me a pamphlet, published by the medical faculty under the hand of its secretary, containing memorials presented to the Board of Trustees of the Hospital concerning this reorganization. The staff of physicians of the Hospital, consisting almost wholly of the professors, associate professors and associates in medicine of the medical faculty, after recommending to the Board of Trustees of the Hospital that in the administration of its affairs every endeavor should be made to safeguard and promote the educational interests and clinical facilities of the University medical faculty, made this positive recommendation:

"That Members of the Staff be not allowed to serve on the Staff of another General Hospital."

In another memorial the staff of surgeons and the staff of specialists of the Hospital, consisting almost wholly

of professors, associate professors and associates in surgery and special departments of the medical faculty of the University of Toronto, say:

"We re-affirm the report adopted and recommended by a meeting of the full staff held January 31st, 1906, concerning the limitation of all appointments, other than those held upon the Consulting Staff, to men who are attached to one General Hospital only."

REPORT OF THE FULL STAFF.

At the meeting of the full staff referred to in this memorial the following resolution was "unanimously adopted and recommended to be forwarded as suggestions for the Board of Trustees":—

"It is recommended that members of the Staff of the Toronto General Hospital be not permitted to belong to the Active Staff of any other General Hospital, it being specially understood that Special Hospitals be not included in this veto."

All the recommendations of the full staff were made after the committee appointed for the purpose had obtained exhaustive information and advice by submitting "a list of questions to leading authorities in Great Britain, the United States and Canada, hoping that the elimination of local or personal considerations which might tend to obscure the opinions of those close at hand would make more possible the formulation of a broad plan for the establishment of a great hospital in a University centre."

The Reorganization Committee and the Board of Trustees therefore in adopting this regulation followed the unanimous advice of the full staff composed almost entirely of members of the teaching staff of the University. The reason for the regulation is sufficiently obvious. It is not possible for a physician or a surgeon to properly attend to his duties on the active staff of two General Hospitals. Dr. Osler says:—

"The physicians should not only make their visits at certain stated hours, but stay certain hours."

AS TO APPOINTMENTS.

In view of some of its recent articles, the following extracts from these memorials will be of interest to The Telegram:—

"That vacancies and positions on the staff be thrown open to the whole medical profession, and all applications be

considered on equal terms." (From report of Staff of Physicians, consisting almost wholly of members of medical faculty.)

From the report of the Committee of the Staff :—

"The contributions to the Hospital scheme by the Province, the city and the University, place Toronto General Hospital on a different footing from that of a local or private charity. It has therefore with reason, been contended that all members of the profession should be accorded equal rights and privileges in connection with such an institution. To concede the right of every practitioner to treat patients in private wards would be to grant privileges not allowed in any properly organized hospital and would with certainty defeat the objects in view in the establishment of a modern hospital in Toronto. By the resignation of the staff and the opening of appointments on equal terms, purely on a basis of merit, and to every practitioner in the city and Province, the best staff can be chosen, the rights of the whole profession recognized, and the interests of the Hospital conserved."

PLENTY OF CLINICAL MATERIAL.

With further reference to your editorial, allow me to say that the University is not confined to the Toronto General Hospital for clinical material, although the greater part will naturally be found there. Medical students attend St. Michael's Hospital and the Hospital for Sick Children, and receive instruction from the members of those staffs who are members of the medical faculty of the University. The Telegram is also gravely in error as to the number of medical students requiring clinical teaching. Only the third and fourth year students attend the hospitals.

EX-OFFICIO APPOINTMENTS.

My own opinion is that the professor of surgery and the professor of medicine in the University should be ex-officio on the staff of all the hospitals in the city, but not in charge of an active service in any one, for his duties would be too heavy, but directing the educational work of his University staff in making use of all the available clinical material. The reorganization of the Toronto General Hospital had this specially in view in its regulation whereby these two professors, if not at heads of services, are still on the active staff and exempt

from its regulations, one of which is that no member shall be on the staff of another General Hospital.

W. T. WHITE.

From The Evening Telegram, May 22, 1908.

MUST BE APPROVED FIRST

CHANGE IN HOSPITAL ACT.

Govt. Must Ratify Appointments Before They Are Valid, Instead of Having Them Valid Unless Disapproved.

A change was made in the Toronto General Hospital Act at the last session of the Legislature.

Clause seventeen, respecting the appointment and removal of officers of the staff, was amended.

Before the change the trustees had the power to make appointments and removals, regulations, etc., subject to the disallowance of the Government. Since the change all such appointments, removals, by-laws, etc., must have the approval of the Government before they come into force.

THE CLAUSE.

Clause 17 was as follows:—"The trustees shall have the power of appointment and removal of the secretary and the treasurer, the medical and other superintendents and their assistants and clerks, and of all other officers and servants of the hospital employed in or about any of its premises, and may from time to time enact such by-laws and regulations for the general management of the hospital and the trust; and for fixing all salaries and wages, and for regulating the composition of the hospital staffs, their numbers, terms of office, privileges and duties, provided always that such by-laws or regulations shall be laid before the Lieut.-Governor-in-Council within 30 days after the same shall have been so enacted as aforesaid; and shall come into force at the expiration of one month thereafter, unless they shall have been disallowed by order-in-Council within the time."

THE CHANGE.

The amendment strikes out all the words after the word "aforesaid," and substitutes the following:—"And shall not come into force until they shall be approved by the Lieut.-Governor-in-Council."

From The Evening Telegram, May 23, 1906
**UNIVERSITY HAS SPECIAL RIGHTS
 THAT HAVE BEEN IGNORED.**

An article which Mr. W. T. White seeks to criticize and nullify did not assert there were not many men who advocated the "one man, one Hospital" system, and perhaps many men in the University ranks who supported the theoretical proposition. The assertion was, that in the present condition and circumstances of the University and of local medical education, it was not in the best interests of either the University or the medical profession to impose such a restriction. With the limited clinical facilities of any one Hospital in Toronto, the University might easily feel the need of having her best clinical teachers in more than one Hospital, and that no Hospital should have the right, except in the interests of its patients, to limit or curtail her University's influence and sphere of action in that direction. But this, Mr. White somewhat illogically acknowledges to be the opinion crystallized in action, of himself and the General Hospital Board in his concluding paragraph, and so that point need not be further argued.

Surely Mr. White is aware that the University of Toronto is not responsible for the opinions expressed in the pamphlet, isolated sections of which he cites with so much show of final authority, and that the teaching staff of the University have not yet made a pronouncement on the subject. It is quite true that most of the members of the Toronto General Hospital staff are (and at that time some twelve to fifteen more were) also members of the University staff. The suggestions Mr. White cites were made by these authorities as Hospital men, and not in their academic capacity, and with a view to allaying the complaints of some, who had not Hospital appointments, that two or more posts were

being monopolized by certain individuals.

Mr. White must recall, however—and herein lies the breach of faith or understanding—that no one concerned in making those recommendations doubted for a moment that the public wards and the whole out-patient department, would be assigned to the University of Toronto as such, as has virtually been the case in the past year. Again, the pamphlet Mr. White quotes as an authority, is a composite document, printed, it is true, not "published," by the University of Toronto, and compiled in part (Appendix I.) by the Secretary of the Medical Faculty for the use and benefit of the Committee on Hospitals thereof in 1904, and in part (Appendix II. and Appendix III.) by a Special Committee of the staff of physicians of the Toronto General Hospital in 1906, but not endorsed or in any wise approved by the University of Toronto, nor purporting so to be in the letter of the Secretary of the Faculty, which went forward with it.

The same remarks apply equally to the other memorials referred to in Mr. White's letter, and need not be recapitulated here.

Mr. White very promptly settles the question of dual appointments by remarking, "The reason for the regulation is sufficiently obvious. It is not possible for a physician or surgeon to properly attend to his duties on the active staff of two General Hospitals." If this be so, the University of Toronto will not require it of members of her staff. But Mr. White's quotation from Dr. Osler does not sustain his proposition beyond question or cavil, or perhaps at all. It must be remembered that the regulation applies to all but the consulting staff, and that the younger men, especially in Great Britain, and to a lesser extent here,

who are in training for consulting practice, spend most of their time and energy in Hospital wards and laboratories. The recommendations of the Hospital staff upon which Mr. White properly lays great store, have upon many other equally important matters been ignored, and it would be interesting, therefore, to learn from Mr. White, who is fond of "informing" The Telegram, why the recommendation numbered 3 in page 21 of the pamphlet, which reads: "It is advised, since the question of Hospital appointments is of such vital importance both to the Faculty of Medicine and to the Hospital, that the Hospital and University authorities should act in harmony in the making of all Hospital appointments," has been disregarded, in common with section 7 on page 23, "It is desirable that the outdoor and the indoor services should be brought into much closer association," and with section 9, "We (the surgical staff) reaffirm the statement of the full staff regarding the appointment of a Medical Board. The Associates in the special departments, as well as the assistant physicians and surgeons, should be members of this Board."

It is understood, of course, that there may be some "objection" to such a Board on account of its size, but surely the recommendation of a staff meeting with so much approval in one instance, should carry equal weight in another of a similar kind; and the outsider is totally at a loss to understand why the University should not be represented directly on such a Board where its influence should be most beneficially exercised.

The perusal of the statistics furnished in the pamphlet affords no ground upon which to base the opinion very obstinately held by the Board, that the number of services in surgery must on no account be more than three, nor does it provide a scintilla of reason

why the University should not be accorded one of those three services or a special one of its own. If, as it was understood and believed would be the case, the Public Wards and the Out-patient Department had been handed over to the University, for the purpose of teaching, and the University had been asked to designate the men to carry out the will and instructions of the University, no friction whatever would have arisen and all would have gone "merry as a marriage bell" in celebrating the union of business ability and common sense with academic methods in imparting knowledge and scientific skill in the relief and succour of suffering humanity. But the over-weening confidence and self-sufficiency of "the business man" could not appreciate this counsel, much in the same way as Mr. White is led to say, "The Telegram is also gravely in error as to the number of students requiring clinical teaching; only the third and fourth year students attend the Hospital," ignorant of the fact that henceforth there are to be five years in the course, that in many places second year students take clinical instruction, and that in the Medical Faculty itself there is a strong body of opinion that from the very first the student should be brought in contact with patients.

Mr. White truly observes that the medical students get instruction in other Hospitals than the General, but this is because they have need of special instructions which the General Hospital does not afford, and because the clinical facilities of that Hospital are not at present equal to the demand.

It is to be hoped that Mr. White, as a member of the University Board of Governors, and also of the General Hospital Board, and his colleagues in both, do not forget that the University

expects and the statute requires them to make those facilities adequate at the earliest possible moment.

From The Evening Telegram, May 26, 1906

THE UNIVERSITY MUST FIGHT FOR VITAL RIGHTS.

The question that has arisen as to the status of the University in the General Hospital reorganization is a thoroughly live issue in University circles.

It may be that the members of the University Board do not recognize the importance of the point that has been raised. They may conclude that as the chairman of the Board and those immediately under his influence are satisfied that the charge made against the Board is "unwarranted and should be withdrawn," action by the Board is unnecessary.

But surely there are some men on the Board who have minds and opinions of their own, men who can rise to the occasion and have this grave misunderstanding between the University and the Hospital Board straightened out.

The charge is made by the friends, yes, and by members of the staff of the University, that that institution has been treated unfairly, that the University has been ignored in the plan of reorganization contrary to the expressed understanding that was given at the time the statutory basis of reorganization was being submitted to the Legislature.

The interview with Dr. Loudon, the late President of the University and also with the Chancellor, both of which interviews have appeared in these columns, sufficiently and unmistakably indicated the University's position, its claims and its expectations in the matter.

Dr. Loudon is no longer the President of the University, but his successor in office, the Rev. Dr. Falconer, has been in due and proper form, endowed and endowed with plenary powers, in fact, he is clothed with more autocratic powers than those of any President in the University world.

It was not without a view to such a contingency as has here arisen (with unexpected suddenness and precipitation) that in the recent change of University government, the new president was endowed with unprecedented power and autocracy, lest at

any time the academic interests of the institution might be made subservient or subordinate to business, pecuniary or other extraneous considerations.

This, therefore, is President Falconer's opportunity to display his vertebrate inflexibility in maintaining academic rights created before his time, and his moral courage in asserting even in the face of internal opposition in the Board of Governors the indefeasible proposition that in an institution of learning, academic rights and privileges are paramount and primary, inalienable and supreme.

To preserve the respect and allegiance of his henchmen in the collegiate ranks, the scales in which the vital interests of education are weighed against more material considerations must be held true in the leader's grasp.

"It were not well the balance swerved—

The sword were broken in his hands."

If the President be sufficiently strong-minded and inflexible—as he should be—the University's rights will not diminish under his control. The cards are all in his hands, and if he plays the game courageously he is bound to come out a winner.

Notwithstanding the denials that have been made, there is no getting away from the fact that the University's expectations were known to the Government and to all who cared to interest themselves in the matter.

The understanding was spoken of time and again at the meetings of the Hospital, the University, and the city's representatives. These meetings were held in the Parliament Buildings about the time that the act was being prepared for its passage through the Legislature. The reporters of the city press were all there, and no secret was made as to the University's objects, intentions and expectations.

The Premier of the province, the Chancellor of the University and the chairman of the Hospital Board all knew of the understanding. This shows that there was a commonality of knowledge amongst all those concerned in the negotiations.

It is to be regretted that the understanding was not reduced to writing, for there is nothing so good in the line of proof as documentary evidence. But the risk of exciting unnecessary opposition on the part of prospective

subscribers to the Hospital funds seemed to render it desirable, in the opinion of the chairman of the Hospital Board, that the understanding should be a tacit one.

Amongst gentlemen a tacit understanding, by its very nature, demands a more rigid adherence to its essence than a written one.

It is a matter of surprise, as well as of regret, that any further insistence upon the carrying out of this understanding should have become necessary.

As a matter of fact, the University has not as many rights—and, as a consequence, not the influence in the Hospital—as it enjoyed before the negotiations.

It is understood that the University's side of the case was presented to the committee of the Hospital Board during the process of reorganization, but those who presented it were evidently turned down.

The truth is that in endeavoring to avoid offending those persons, if any, who, in the opinion of probably the chairman of the Hospital Board, might be supposedly unfriendly to the University, the Hospital Board by its action has impaled itself on the other horn of the dilemma and is now alienating all true friends of the University.

It was, and is a matter of agreement between the University and the Hospital Board that if at any time a deadlock arose between the two bodies, the Lieutenant-Governor-in-Council should be called upon to straighten out the tangle and so settle the matter in dispute.

It seems to us that now is the appropriate time for the Premier of this province to use his gavel and call the two parties to order, and then proceed to exercise his function of arbitrator—that is, unless one of the parties capitulate.

The friends of the University have formed opinions on the subject. They claim that the course of the governors of their institution is clear as the sun at high twelve, that there must be no capitulation—not even compromise.

The position of the University is impregnable. The University went into the enterprise of aiding in a great work—the erection of a modern hospital—on certain terms, some written, others unwritten. On the understanding that the University would be directly recognized in at least one of the

services, it paid, by the authority of the Government, \$300,000 as a contribution to the erection of the new Hospital.

Nothing could be plainer than the terms upon which the University entered into the arrangement.

The University wanted certain recognition and was willing to pay for it. It did its share as in honor bound, but the Hospital Board, when its time to fulfill came round, forgot its promise and coolly, through its chairman and one of its members, declared that the University is getting all that it is entitled to get, and that many think the University, forsooth, has been "unduly favored."

It is far from creditable to the men who are responsible for it. But the University may yet call the turn.

It is now up to the President of the University and his fellow-governors to assert and maintain the undiminishable rights that were guaranteed to the University.

There can be no half measures in settling this matter. The University either has the rights claimed or it has not. If the University had these rights as claimed, let these rights be secured to it.

If on the other hand these claims are without foundation, then those who entered into the agreement on the University's behalf stand convicted of a sacrifice of her vital interests.

From The Evening Telegram, May 23, 1908

HOSPITAL APPOINTMENTS

SHOULD DOCTORS BE RESTRICTED TO ONE HOSPITAL ?

The Question in England — What the British Medical Journal Has to Say on the Subject.

The British Medical Journal had in September, 1907, an excellent article on the "Plurality of Hospital Appointments in Connection with a Proposal Made by the Governors of the Bristol Infirmary." The editorial reads:—

The question of pluralism in hospital appointments has in recent years been discussed as an academic question both by bodies more or less representative of the medical profession and in the lay press. It has now come within the sphere of practical politics in an acute

form at Bristol. At a meeting of the Governors of the Royal Infirmary, alterations in the rules will be proposed that, if carried, will debar members of the full staff from holding any professional appointments other than professorships or lectureships at a university, college or school, and members of the assistant staff from holding any other general hospital appointment, or more than one special hospital appointment.

AN INSULT TO THE PROFESSION.

As to the reasons that may have moved the civic magnates who control the temporalities of the Bristol Royal Infirmary to make this egregious proposal, we are in the mental position of Mr. Micawber in regard to "gowans." Whatever the reasons may be, however, we beg to tell the governors that the proposed new rules are at once foolish in themselves and insulting to the medical profession. Hospital appointments are valuable to young men as affording opportunities of increasing their knowledge and perfecting their skill. One would have thought it might have been obvious, even to the mind of a lay committee-man, that the larger experience a man has the more efficiently he is likely to discharge the duties of a hospital physician or surgeon.

UNFAVORABLE TO PATIENTS.

It is, therefore, directly contrary to the interests of patients that the sphere in which such experience can be gathered should be arbitrarily narrowed; and it is not only the poor who will suffer from this cause, for it is the hospital physicians and surgeons we have mainly to look for the improvement of the art of healing. Want of means, or other causes, undoubtedly prevent many able men from taking hospital appointments. Those, however, in whose hands such appointments lie are bound to select the best men at their disposal, and the fact that a physician or surgeon is appreciated by the governors of other institutions is prima facie evidence of his professional fitness and of his capacity to work in harmony with his colleagues—a quality almost equally essential in the members of a hospital staff.

HANDICAPS YOUNG DOCTORS.

Young men have not, as a rule, sufficient private practice to occupy all their time; it is natural, therefore,

that those who wish to qualify themselves for the consulting ranks of the profession should take every opportunity presented to them of enlarging their experience. Apart altogether from higher considerations, it is to their interest to do their work as officers of a public institution as efficiently and as diligently as possible, and their willingness to use in this way the time not otherwise occupied should be regarded as a proof of keen interest in their professional work rather than as a disqualification for appointments. Of course, if a man does good work in this way it makes him favorably known to his brethren, and through them to the public. It would be mere cant to pretend that hospital work is done wholly from altruistic motives.

THE DOCTOR HAS TO LIVE.

The doctor has to live by his profession as the priest lives by the altar, and it is only just that he should receive some return for arduous service rendered without pecuniary reward. As long as a man performs in a satisfactory manner the duties which he has undertaken, the governors of a hospital have no shadow of right to interfere with his professional activity in any legitimate direction.

DOCTORS NOT SERVANTS.

The proposed new rule of the Bristol Royal Infirmary is an insult to the profession, for it means that the governors assume it to be within their province to prevent members of their staff from spending time over which they have no control in such manner as these officers may think best for their professional advantage. Lay committees must once for all be taught to clear their minds of the delusion that physicians and surgeons who do the medical work of hospitals are in any sense their servants.

PROPOSAL WILL BE RESENTED.

Without entering into the question whether or not hospitals should be administered wholly by laymen, we think it essential that committees should rightly understand their position. However intelligent and sympathetic they may be—and we think it only fair to say that for the most part they display both these qualities—they are after all only hewers of wood and drawers of water. It is not they who build the city, nor is it their work that gives it such repute as it may enjoy

for the relief of suffering and the advancement of medical science. The pretension implied in the proposed new rules of the Bristol Royal Infirmary is an impertinence which will be resented by the profession. The Infirmary has a long and praiseworthy record as a medical institution : next to Chester,

it is, we believe, the oldest provincial hospital in England. In the best interests of the Infirmary, we urge the governors not to persevere in a policy discreditable to themselves and likely to be harmful to an institution with which are associated many great names in the history of medicine.